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## **EBOLA**

### **Frequently Asked Questions**

#### **What Is Ebola?**

Ebola virus disease (EVD) previously known as Ebola Hemorrhagic fever, is a rare and often fatal disease caused by infection with one of the Ebola virus strains (Zaire, Sudan, Bundibugyo or Tai Forest). The first Ebola virus was discovered in 1976 near the Ebola River in what is now the Democratic Republic of Congo.

#### **How is it spread?**

The disease is transmitted from human-to-human by direct contact (through broken skin or mucous membranes) with:

- blood, saliva, mucous, feces, vomitus, semen or other body fluids of a a person who is sick (having symptoms) with Ebola or who has died from Ebola.
- objects, especially needles and syringes that have been contaminated with the virus, i.e. contaminated with body fluids from an infectious Ebola patient..
- Infected animals

Ebola is NOT spread through the air or by water.

An person with Ebola is not contagious until symptoms appear.

#### **What are symptoms?**

Symptoms of Ebola virus infection can take anywhere from 2 to 21 days, after exposure to appear (called the incubation period), and can include sudden onset of fever, fatigue, muscle pain, headache and sore throat. Humans are not considered infectious until the onset of symptoms. As the illness progresses, patients may experience vomiting, diarrhea, rashes, impaired kidney and liver function, and in some cases, the CDC says, both internal and external bleeding. Initially, the complaints from the patient are very non-specific. A travel history by

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treating healthcare personnel will be critical.

### **How is it diagnosed?**

Early detection of Ebola virus in a person who has only been infected for a few days can be tricky because symptoms like fever, fatigue and muscle pain can also be indicative of other commonly occurring diseases. Additionally, a patient with Ebola may also have other infections which would make diagnosis difficult. However a person exhibiting early symptoms of the disease who has had known contact with an Ebola patient, contaminated surfaces or infected animals or who has travelled in the last 21 days from an endemic area should be isolated immediately. Blood tests can confirm or eliminate Ebola as the cause of illness in suspected cases.

### **How is it treated?**

There is currently no cure for Ebola, but several experimental treatments including blood products made from Ebola survivors, immune therapies and other drugs are being evaluated. Patients receive supportive care for symptoms and are treated with intravenous fluids to prevent severe dehydration. While there are no approved vaccines for the virus yet, two drugs are currently undergoing human safety testing, according to the CDC.

### **How can it be prevented?**

Prevention of Ebola is primarily focused on avoiding contact with the disease by staying away from outbreak areas, avoiding contact with infected people in the contagious stage and infected animals, washing your hands with soap and water frequently and not handling remains of those who have died from the disease. It is important to note that animals in the United States are not infected with ebola.

If you're a health care worker, following infection control protocols is key; wear protective clothing, gloves and masks; keep infected patients in isolation; and be sure to dispose of and/or thoroughly sterilize medical equipment.

### **Why is there such a large outbreak?**

In countries where Ebola outbreaks have occurred, health aid workers are often at an increased risk for contracting and spreading the disease because the health care infrastructure does not

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provide for proper precautions to be taken. Burial ceremonies in these countries are another way the virus is spread. It is a custom in these countries to bathe and touch the deceased as part of their death rituals. When friends and family come in contact with deceased Ebola victims during their death rituals they are unwittingly spreading the disease.

This is very different than the healthcare infrastructure in the United States. Contact precautions are regularly followed and personal protection equipment is readily available. Virtually any US hospital that can isolate a patient, can care for a person infected with Ebola.

### **What countries are involved in the outbreak in West Africa?**

The current outbreak in West Africa is affecting four countries. They are Liberia, Nigeria, Guinea and Sierra Leone. There has also been an outbreak reported in the Democratic Republic of Congo. That outbreak has been traced to a single patient who became infected after preparing bushmeat (eating the meat of a wild animal infected with Ebola). This outbreak is **not** related to the ongoing Ebola outbreaks in Guinea, Nigeria, Liberia, and Sierra Leone.

### **What precautions are being taken to prevent the spread of Ebola?**

A U.S. Department of Transportation rule permits airlines to deny boarding to air travelers with serious contagious diseases that could spread during flight, including travelers with possible Ebola symptoms. This rule applies to all flights of U.S. airlines, and to direct flights (no change of planes) to or from the United States by foreign airlines. All passengers leaving the countries mentioned above are being screened for illness prior to boarding. Any passengers with a fever or any overt illness are prevented from boarding the plane.

The risk of spreading Ebola to passengers or crew on an aircraft is low because Ebola spreads by direct contact with infected body fluids. **Ebola does NOT spread through the air.**

Additionally, the US Department of State has issued travel alerts regarding travel to West African countries involved in the outbreak.

The CDC has issued a Warning, Level 3 travel notice for three countries. U.S. citizens should avoid all nonessential travel to Guinea, Liberia, and Sierra Leone. CDC has issued an Alert, Level 2 travel notice for Nigeria. Travelers to Nigeria should take enhanced precautions to prevent Ebola. CDC has also issued an Alert, Level 2 travel notice for the Democratic Republic of the Congo (DRC).

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The CDC has staff working 24/7 at 20 Border Health field offices located in international airports and land borders. CDC staff are ready 24/7 to investigate cases of ill travelers on planes and ships entering the United States.

CDC works with partners at all ports of entry into the United States to help prevent infectious diseases from being introduced and spread in the United States. CDC works with Customs and Border Protection, U.S. Department of Agriculture, U.S. Coast Guard, U.S. Fish and Wildlife Services, state and local health departments, and local Emergency Medical Services staff.

Relatively few of the approximately 350 million travelers who enter the United States each year come from these countries. Secondly, most people who become infected with Ebola are those who live with or care for people who have already caught the disease and are showing symptoms.

### **Are there any cases of people contracting Ebola in the U.S.?**

CDC confirmed on September 30, 2014, the first travel-associated case of Ebola to be diagnosed in the United States. The person traveled from West Africa to Dallas, Texas, and later sought medical care at Texas Health Presbyterian Hospital of Dallas after developing symptoms consistent with Ebola. The medical facility has isolated the patient. Based on the person's travel history and symptoms, CDC recommended testing for Ebola.

CDC recognizes that even a single case of Ebola diagnosed in the United States raises concerns. Knowing the possibility exists, medical and public health professionals across the country have been preparing to respond. CDC and public health officials in Texas are taking precautions to identify people who have had close personal contact with the ill person and health care professionals have been reminded to use meticulous infection control at all times.

### **Are people who were on the plane with this patient at risk?**

A person must have symptoms to spread Ebola to others. The ill person did not exhibit symptoms of Ebola during the flights from West Africa and CDC does not recommend that people on the same commercial airline flights undergo monitoring. The person reported developing symptoms five days after the return flight. CDC and public health officials in Texas are taking precautions to identify people who have had close personal contact with the ill person and health care professionals have been reminded to use meticulous infection control at all times.

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### **Is there a danger of Ebola spreading in the U.S.?**

Ebola is not spread through casual contact; therefore, the risk of an outbreak in the U.S. is very low. We know how to stop Ebola's further spread: thorough case finding, isolation of ill people, contacting people exposed to the ill person, and further isolation of contacts if they develop symptoms. The U.S. public health and medical systems have had prior experience with sporadic cases of diseases such as Ebola. In the past decade, the United States had 5 imported cases of Viral Hemorrhagic Fever (VHF) diseases similar to Ebola (1 Marburg, 4 Lassa). None resulted in any transmission in the United States.

### **I have plans to fly soon, should I cancel my trip?**

The risk of spreading Ebola to passengers or crew on an aircraft is very low because Ebola spreads by direct contact with infected body fluids. **Ebola does NOT spread through the air.**

### **What do I do if I am traveling to an area where the outbreak is occurring?**

If you are traveling to an area where the Ebola outbreak is occurring, protect yourself by doing the following:

- Wash your hands frequently or use an alcohol-based hand sanitizer.
- Avoid contact with blood and body fluids of any person
- Do not handle items that may have come in contact with an infected person's blood or body fluids.
- Do not touch the body of someone who has died from Ebola.
- Do not touch bats and nonhuman primates or their blood and fluids and do not touch or eat raw meat prepared from these animals.
- Avoid hospitals where Ebola patients are being treated. The U.S. Embassy or consulate is often able to provide advice on facilities.
- Seek medical care immediately if you develop fever (temperature of 101.5°F/ 38.6°C) and any of the other following symptoms: headache, muscle pain, diarrhea, vomiting, stomach pain, or unexplained bruising or bleeding.
  - Limit your contact with other people until and when you go to the doctor. Do not travel anywhere else besides a healthcare facility.

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### **What should I do if I think I was exposed to Ebola?**

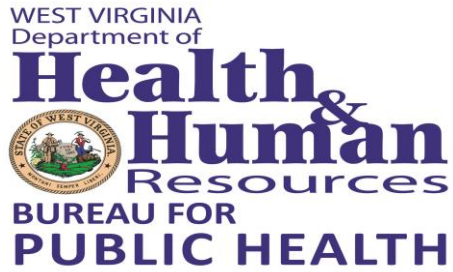
If you were exposed to Ebola during your trip, call your doctor even if you do not have symptoms. Your doctor should evaluate your exposure level and symptoms if you have them and consult with public health authorities to determine whether actions, such as medical evaluation and testing for Ebola, monitoring, or travel restrictions for you are needed.

Pay attention to your health after you return, even if you were not exposed to Ebola during your trip.

- Monitor your health for 21 days if you were in an area with an Ebola outbreak.
  - o Take your temperature every morning and evening.
  - o Watch for other Ebola symptoms: severe headache, muscle pain, vomiting, diarrhea, stomach pain, or unexplained bleeding or bruising.
  - o If your temperature is above 101.5°F (38.6°C) and you have any other Ebola symptoms, seek medical care immediately.
- Tell the doctor about your recent travel and your symptoms before you go to the doctor's office or hospital. Advance notice will help the doctor care for you and protect other people who may be in the doctor's office or hospital.
- Limit your contact with other people when you travel to the doctor; avoid public transportation.
- Do not travel anywhere except to the doctor's office or hospital.
- During the time that you are monitoring your health, you can continue your normal activities, including work. If you get symptoms of Ebola, it is important to stay apart from other people and to call your doctor right away.

### **What has the Bureau For Public Health been doing ?**

As part of our core and ongoing Public Health Mission, the Bureau for Public Health has been monitoring the international Ebola situation closely. Our Center for Threat Preparedness and health command have been in contact with first responders and hospitals, sharing critical information on the proper infection control processes for anyone suspected or confirmed with Ebola. Additionally, the Bureau has issued Health Alert Notifications to all hospitals, labs, emergency departments and local health departments. Should an infection be found in WV, the Bureau for Public Health and its dedicated employees are ready to respond and stop the spread of this disease in WV.



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### **Should I be concerned?**

We all need to be on our guard. Anytime a new illness comes to the United States there is reason for concern. The Bureau for Public Health recognizes that this one case in Texas raises concern and worry. We all play a part in keeping ourselves and our families safe. Avoid travel to West Africa. If you cannot avoid travel to endemic areas, then be aware of the cautions and guidelines established by the CDC and the US State Department for travelers. Know the facts, Ebola is not spread through the air, Ebola is not spread through water and in the United States, Ebola is not spread through food.